

Oklahoma State Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: DET-090	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED R-C 06/23/2021
NAME OF PROVIDER OR SUPPLIER OKLAHOMA COUNTY DETENTION CENTER		STREET ADDRESS, CITY, STATE, ZIP CODE 201 N SHARTEL OKLAHOMA CITY, OK 73102		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
{P5230}	Continued From page 11 injuries have been transferred to an outside medical facility since the February 5, 2021 inspection. 5) Records revealed, between February 5, 2021 through June 23, 2021, only two (2) inmates have been reported to the Oklahoma State Department of Health for an injury requiring transfer to outside medical facility. The dates of the two (2) injuries reported were April 19, 2021 and May 4, 2021. 6) Records reviewed from February 6, 2021 through June 23, 2021, revealed 215 inmates were transferred to outside hospital for treatment.	{P5230}		
{P5232}	310:670-5-2(27)(D) Detention Facilities-Notification of Suicide The facility administrator shall develop and implement written policies and procedures for the safety, security and control of staff, inmates and visitors. Policies and procedures shall address at least the following: (27) The Department shall be notified no later than the next working day if any of the following incidents occur: (D) Serious suicide attempt, defined as life threatening or requiring transfer to outside medical facility; and This STANDARD is not met as evidenced by: Based on observation and record review, the facility failed to notify the Oklahoma State Department of Health of serious suicide attempts,	{P5232}	Pursuant to Title 74, Section 193(B)(1), the Department provides the following proposals for solution:	

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{P5232}	Continued From page 12 requiring transfer to outside medical facility. Finding(s): REPEAT DEFICIENCY 1) When requested the facility administrator failed to provide for review the facility's Admission and Release records (FIT Log) from June 7, 2021 to June 23, 2021. 2) Shift Command log for June 18, 2021, revealed inmate #8 was at an outside medical facility. Staff reported this inmate was sent to an outside hospital due to self harm. 3) Staff reported inmates have been transferred to an outside medical facility for suicide attempts, since the February 5, 2021 inspection. 4) Records revealed, between February 5, 2021 through June 23, 2021, no inmates have been reported to the Oklahoma State Department of Health for a serious suicide attempt, requiring transfer to outside medical facility. 5) Records reviewed from February 6, 2021 through June 23, 2021, revealed 215 inmates were transferred to outside hospital for treatment.	{P5232}	1) Conduct staff interviews to assess why the policy was not followed. 2) Ensure the policy reflects the current expected practice and revise as needed. 3) If the policy is revised or if the assessment determines staff knowledge of the policy is incomplete, conduct training of staff on the policy. 4) Review and adopt further corrective actions as needed based on observations and interviews. 5) Conduct periodic monitoring of the correction for compliance, conduct further training and/or review, revise the policy and adopt further corrective actions as needed.	
{P5301}	310:670-5-3(b) Detention Facilities-Staff 24 Hr Supervision Supervision of inmates: (b) Staff shall provide twenty-four (24) hour supervision of inmates.	{P5301}		